RULES OF

TENNESSEE DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION

CHAPTER 0940-5-26 MINIMUM PROGRAM REQUIREMENTS FOR MENTAL RETARDATION PLACEMENT SERVICES FACILITIES

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0940-5-26-.01 POLICIES AND PROCEDURES FOR PLACEMENT SERVICES FACILITIES.

- (1) The written policies and procedures manual must include the following elements:
 - (a) Procedures for tuberculosis control and reporting of infectious and communicable diseases to the Tennessee Department of Health and Environment;
 - (b) Policies and procedures establishing minimum requirements in all placement providers' homes for ensuring safety to life in the event of fire. These policies and procedures minimally must ensure:
 - (1) Fire safety features of smoke detectors, fire extinguishers and two alternate means of escape from sleeping rooms in each provider's home, and
 - (2) Training for all providers in developing and implementing evacuation procedures within each provider's home; and
 - (c) Policies and procedures establishing minimum requirements in all placement providers' homes regarding environmental conditions and ancillary services. The policies and procedures must address minimum standards for health and sanitation, adequate furnishings and facilities for meeting the needs of the clients and food and nutrition in providers' homes.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.02 PROFESSIONAL SERVICES IN PLACEMENT SERVICES FACILITIES.

(1) The facility must provide or procure assistance for clients in locating qualified dental, medical, nursing and pharmaceutical care including care for emergencies during hours of the facility's operation

(Rule 0940-5-26-.02, continued)

- (2) The facility must ensure that an annual physical examination is provided or procured for each client (unless less often is indicated by the client's physician). Such examinations should include routine screenings (such as vision and hearing) and laboratory examinations (such as Pap smear and blood work), as determined necessary by the physician and special studies where the index of suspicion is high.
- (3) The facility must ensure that an annual dental screening is provided or procured for each client.
- (4) The facility must ensure that each client is provided with immunizations as required by the Department of Health and Environment unless contraindicated by a physician's order.
- (5) The facility must ensure that each client receives a medical exam within ninety (90) days before or thirty (30) days after admission.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.03 PERSONNEL AND STAFFING REQUIREMENTS FOR PLACEMENT SERVICES FACILITIES.

- (1) The governing body must ensure that no more than three (3) clients are placed in an individual home at any given time.
- (2) The governing body must ensure that employees and providers practice infection control procedures that will protect clients from infectious diseases.
- (3) Employees and providers must have a regular tuberculosis skin test within thirty (30) days of employment and as required thereafter by current Department of Health and Environment guidelines.
- (4) Employees and providers must be provided with a basic orientation in the proper management of individuals with seizure disorders prior to being assigned to work with individuals with such disorders.
- (5) Clients must never be left unattended during normal sleeping hours.
- (6) Employees and providers must be trained in First Aid and the Heimlich maneuver.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.04 Client Record Requirements for Placement Services Facilities.

- (1) Each client record must contain the following information:
 - (a) A recent photograph and a description of the client;
 - (b) The client's social security number;
 - (c) The client's legal competency status;
 - (d) The client's sources of financial support including social security, veteran's benefits and insurance;
 - (e) The sources of coverage for medical care costs;
 - (f) The name, address and telephone number of the physician or health agency providing medical services;

(Rule 0940-5-26-.04, continued)

- (g) Documentation of all drugs prescribed or administered by the facility which indicates date prescribed, type, dosage, frequency, amount and reason;
- (h) A discharge summary which states the date of discharge, reasons for discharge and referral for other services, if appropriate;
- (i) Report of medical problems, accidents, seizures and illnesses and treatments for such medical problems, accidents, seizures and illnesses;
- (j) Report of significant behavior incidents and of actions taken;
- (k) Report of the use of restrictive behavior management techniques;
- (l) A list of each individual article of each client's personal property valued at fifty dollars (\$50) or more, including its disposition if no longer in use; and
- (m) Written accounts of all monies received and disbursed on behalf of the client.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.05 MEDICATION ADMINISTRATIVE IN PLACEMENT SERVICES FACILITIES.

- (1) The client's ability and training must be considered when supervising the administration of medication,
- (2) Prescription medications are to be taken only by clients for whom they are prescribed and in accordance with the directions of a physician.
- (3) Drugs must be stored in a locked container which ensures proper conditions of security and sanitation and prevents accessibility to any unauthorized person;
- (4) Discontinued and outdated drugs and containers with worn, illegible, or missing labels must be disposed.
- (5) All medications errors, drug reactions, or suspected overmedications must be reported to the practitioner who prescribed the drug.
- (6) Evidence of the current prescription of each medications taken by a client must be maintained.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.06 CLIENT HEALTH, HYGIENE AND GROOMING PROVISIONS IN PLACEMENT SERVICES FACILITIES. The governing body must ensure that clients receive assistance and training, as needed, with health, hygiene and grooming practices.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.07 CLIENT CLOTHING PROVISIONS IN PLACEMENT SERVICES FACILITIES.

- (1) Each client must be provided the least restrictive level of support and assistance needed in the selection and purchase of clothing.
- (2) Each client must be allowed to dress himself in his/her own clothes and to change clothes at appropriate times according to individual abilities

(Rule 0940-5-26-.07, continued)

- (3) Each client must be assisted in securing an adequate allowance of personally-owned, individualized, normal, clean and seasonal clothes.
- (4) Any marking of clients' clothing for identification purposes must be done in an inconspicuous manner.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.08 RECREATIONAL ACTIVITIES FOR PLACEMENT SERVICES FACILITIES. The governing body must ensure that opportunities are provided for recreational activities which are appropriate to and adapted to the needs, interests and ages of the client's served.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.09 DAY ACTIVITY PROVISIONS FOR PLACEMENT SERVICES FACILITIES.

- (1) The governing body must ensure that day activities are provided or procured. Such day activities must be in accordance with the age level and interests and abilities of the clients and in accordance with Individual Program Plans.
- (2) If the client attends a school or day program provided outside of the facility, the governing body must ensure that the facility's staff participates with the school personnel in developing an individual education plan or with the day program staff in developing an Individual Program Plan, as appropriate.
- (3) The governing body must ensue that each multiply-handicapped and non-ambulatory client:
 - (a) Is assisted by a direct-services staff member in spending at least three (3) hours of their waking day out of bed unless contraindicated by a physician's order;
 - (b) Is assisted by a direct-services staff member in spending a portion of their waking day out of their bedroom area;
 - (c) Is assisted by a direct-services staff member in an exercise period daily; and
 - (d) Is assisted in being mobile whenever possible by the use of wheelchairs or other mobility devices.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.10 CLIENT ASSESSMENT REQUIREMENTS FOR PLACEMENT SERVICES FACILITIES.

- (1) The following client assessments must be completed prior to the development of the Individual Program Plan:
 - (a) An assessment of current functioning in such areas as adaptive behavior and independent living skills;
 - (b) A basic medical history and information and determination of the necessity of a medical evaluation and a copy, where applicable, of the results of the medical evaluation;
 - (c) A six (6) month history of prescribed medications, frequently used over-the-counter medications and alcohol or other drugs; and
 - (d) An existing psychological assessment on file which is updated as recommended by interdisciplinary team decision.

(Rule 0940-5-26-.10, continued)

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.11 INDIVIDUAL PROGRAM PLAN TEAM REQUIREMENTS FOR PLACEMENT SERVICES FACILITIES.

- (1) The governing body must ensure than an Individual Program Plan team is identified and provided for each client. The team must minimally include the following:
 - (a) The client, unless contraindicated by the individual program plan team;
 - (b) The client's parents or guardian, if appropriate, unless their inability or unwillingness to attend is documented;
 - (c) Direct services staff with input from each shift and weekend staff, as appropriate;
 - (d) Relevant professionals or persons, unless their inability to attend is documented; and
 - (e) A mental retardation specialist.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.12 INDIVIDUAL PROGRAM PLAN DEVELOPMENT AND IMPLEMENTATION IN PLACEMENT SERVICES FACILITIES.

- (1) The governing body must ensure that a written, Individual Program Plan (IPP) is provided and implemented for each client. The IPP must meet the following requirements:
 - (a) Developed within thirty (30) days of the client's enrollment in the facility;
 - (b) Developed by the client's Individual Program Plan team;
 - (c) Includes the date of development of the IPP;
 - (d) Includes the signatures of client or guardian and the appropriate staff;
 - (e) Specifies the client's needs identified by assessment and to be addressed by the particular service/program component; and
 - (f) Includes client goals and objectives which are related to the specific needs identified and which are to be addressed by the particular service/program component; and
 - (g) Includes methods or activities by which the client goals and objectives are to be implemented.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.13 INDIVIDUAL PROGRAM PLAN MONITORING AND REVIEW FOR PLACEMENT SERVICES FACILITIES.

- (1) Written progress notes must be maintained which include monthly documentation of progress or changes occurring within the IPP.
- (2) The Individual Program Plan team must review the IPP annually and revise, if indicated.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.

0940-5-26-.14 REQUIREMENTS FOR THE USE OF RESTRICTIVE BEHAVIOR MANAGEMENT FOR PLACEMENT SERVICES FACILITIES.

- (1) Corporal punishment must not be used.
- (2) Behavior-management programs must not employ techniques that may result in denial of a nutritionally adequate diet.
- (3) Physical restraint, drugs for behavior management, time-out rooms, aversive stimuli, or other techniques with similar degrees of restriction or intrusion must not be employed except as an integral part of an Individual Program Plan that is designated by the client's Individual Program Plan team to lead to a less restrictive way of managing, and ultimately to the elimination of, the behavior.
- (4) Restrictive or intrusive behavior-management procedures must not be used until less-restrictive alternatives for dealing with the problem behavior have been systematically tried or considered and have been determined to be inappropriate or ineffective.
- (5) Prior to the implementation of a written program incorporating the use of a highly restrictive or intrusive technique, the facility must document that the program has been reviewed and approved by the client or the client's legal guardian and the facility must appoint a Human Rights Committee to review and approve the written program.
- (6) Emergency procedures used to prevent a client from inflicting bodily harm may not be repeated more than three (3) times within six (6) months without being incorporated into a written behavior-management program that is part of an Individual Program Plan designed by the client's Individual Program Plan team.
- (7) Behavior-management drugs may be used only when authorized in writing by a physician for a specific period of time.
- (8) Chemical restraint may be used only when authorized and supervised by a physician in attendance.
- (9) A client placed in chemical restraint must be under continuous staff observation.
- (10) If the use of chemical restraint is necessary beyond twenty-four (24) hours, the situation must be reevaluated, authorized and supervised by a physician in attendance.
- (11) The program for the use of a mechanical restraint must specify the extent and frequency of the monitoring according to the type and design of the device and the condition of the client.
- (12) A client placed in mechanical restraint must be released for a minimum of ten (10) minutes at least every two (2) hours and provided with an opportunity provided for motion, exercise, liquid intake and toileting.
- (13) Personal restraint/physical holding may be used only until the client is calm.
- (14) If the use of personal restraint/physical holding is necessary beyond sixty (60) minutes, the situation must be re-evaluated and authorized by a mental retardation specialist.
- (15) The client placed in a time-out room must be released after a period of not more than sixty (60) minutes.
- (16) The ability of a client to exit a time-out room must not be prevented by means of keyed or other locks; and time-out rooms must allow for the immediate entry of staff.

(Rule 0940-5-26-.14, continued)

(17) Aversive stimuli may be used only when the behavior of a client is likely to cause irreparable harm to himself or others, the behavior precludes his or her development and less negative procedures have, in the immediate past, been documented to be ineffective in reducing or eliminating this particular behavior.

Authority: T.C.A. § 33-2-504. Administrative History: Original rule filed May 26, 1988; effective July 11, 1988.